ログシ シンコンハイ アクロ

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

GLF-01-001-CIP.1 10/087378

			SMALL ENTITY		OTHER THAN OR SMALL ENTITY							
TOTAL CLAIMS			(Column 1)		(Colur		ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	ł	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			38 minus 20=		*	18	ł	X\$ 9=	162	OR	X\$18=	
1/			1/	us 3 =	*	10	ł		42		X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							ŀ	X42=		OR	∧04=	
								+140=		OR	+280≃	
* If the difference in column 1 is less than zero, enter "0" in						olumn 2		TOTAL	574	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* . 38	Minus	2 🕶	38	= O	Ī	X\$ 9=		OR	X\$18=	
	Independent	* 4	Minus	***	4	= O	ı	X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		Ì	+140=		OR	+280=	
							I	TOTAL		ΛB	TOTAL	
		,	ADDIT. FEE		,	ADDIT. FEE						
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	E	HIGH NUM PREVI	mn 2) HEST ABER OUSLY FOR	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 24	Minus	** =	38	=		X\$ 9=		OR	X\$18=	
	Independent	. 4	Minus	***	4	-		X42=		OR	X84=	
╠	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
ļ	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	wk		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		a .		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT				IT CLAIM			+140=			1200-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										QR 0R	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The 'Highest Nur	nher Previously P	aid For" (Total or	Independ	dent) is the	e highest numbe	r for	and in the app	propriate bo:	x in co	iumn 1.	